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## BIB DATA SHEET

CONFIRMATION NO. 6095

SERIAL NUMBER	FILING or 371(c) DATE RULE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/716,127	11/17/2003	601	3731	END0745USDIV2
<b>APPLICANTS</b> William T. Donofrio, Cincinnati, OH; Richard M. Harper, Cincinnati, OH; Richard F. Schwemberger, Cincinnati, OH; Robert P. Gill, Mason, OH; Mary E. Schramm, Cincinnati, OH; Jason A. Born, Cincinnati, OH;				
<b>** CONTINUING DATA *****</b> This application is a DIV of 09/879,319 06/11/2001 PAT 6,945,981 which claims benefit of 60/242,159 10/20/2000				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 02/13/2004				
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged <u>/VICTOR X NGUYEN/</u> Examiner's Signature	<input type="checkbox"/> Met after Allowance VN Initials	<b>STATE OR COUNTRY</b> OH	<b>SHEETS DRAWINGS</b> 19	<b>TOTAL CLAIMS</b> 5
<b>INDEPENDENT CLAIMS</b> 1				
<b>ADDRESS</b> PHILIP S. JOHNSON JOHNSON & JOHNSON ONE JOHNSON & JOHNSON PLAZA NEW BRUNSWICK, NJ 08933-7003 UNITED STATES				
<b>TITLE</b> FINGER OPERATED SWITCH FOR CONTROLLING A SURGICAL HANDPIECE				
<b>FILING FEE RECEIVED</b> 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	